

*8/ Reg Ext
Hutz (2mo)*

PTO/SB/22 (05-03)

Approved for use through 4/30/2003. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) 21854-00016-US
In re Application of Penny Corrigan		
Application Number 09/743,479	Filed January 10, 2001	
For: BIOCIDAL PACKAGING SYSTEM		
Art Unit 1615	Examiner I. Ghali	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$	
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$	410.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$	
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$	
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$	

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0185.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record.

☒ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) 24,518

* June 16, 2003
Date

(202) 331-7111
Telephone Number

Morris Lias
Signature

Morris Lias
Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306, on the date shown below.

Dated: _____ Signature: _____ (Morris Lias)